B1 (Official Form 1)(04/13)	United	States	s Bankr	untev (	Court					
·			n District			V 4-2 V			Vol	luntary Petition
Name of Debtor (if individual Smith, Clifford S.	al, enter Last, Fir	st, Middle):	:			of Joint Deith, Nicol	ebtor (Spouse e Y.	) (Last, First	, Middle):	
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):					(includ		used by the J maiden, and Y. Yania			} years
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all)  xxx-xx-0429				(if more	our digits o than one, state	f Soc. Sec. or	· Individual-	Гахрауег I.	D. (ITIN) No./Complete EIN	
Street Address of Debtor (No. and Street, City, and State): 1192 Substation Road Brunswick, OH				ZIP Code	Street 119	Address of	Joint Debtor tion Road DH	(No. and St	reet, City, a	and State):  ZIP Code
County of Residence or of the Medina	e Principal Place	of Busines		4212		y of Reside	ence or of the	Principal Pla	ace of Busi	44212 iness:
Mailing Address of Debtor (if different from street address):					Mailin	g Address	of Joint Debt	or (if differe	nt from stre	eet address):
ZIP C				ZIP Code	$\dashv$					ZIP Code
Location of Principal Assets (if different from street addre	of Business Debt ss above):	or	•		•					
Type of Debtor Nature of Business						•	of Bankrup Petition is Fi	. •	Under Which	
(Form of Organization) (Check one box)  Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Clearing Bank □ Other			defined	Chapt Chapt Chapt Chapt Chapt	er 7 er 9 er 11 er 12	☐ Ci of ☐ Ci of	hapter 15 P a Foreign hapter 15 P	Petition for Recognition Main Proceeding Petition for Recognition Nonmain Proceeding		
Chapter 15 De Country of debtor's center of ma Each country in which a foreign by, regarding, or against debtor i	in interests:	☐ Deb	Tax-Exen (Check box, tor is a tax-exe er Title 26 of the (the Internal	if applicable mpt organiza ne United Sta	ation ates	defined "incurr	are primarily co I in 11 U.S.C. § ed by an indivi nal, family, or	(Check onsumer debts, 3 101(8) as idual primarily	k one box)	☐ Debts are primarily business debts.
Filing Fee (Check one box)  Full Filing Fee attached  Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.				Check in D Check in D ar Check a Check a Check a A A	bebtor is a smeether is not for the less than see less tha	regate nonco \$2,490,925 (e boxes: ag filed with of the plan w	debtor as definess debtor as contingent liquida amount subject this petition.	defined in 11 to ated debts (exc to adjustment	C. § 101(51I U.S.C. § 1016 Cluding debts	
Statistical/Administrative Information  ☐ Debtor estimates that funds will be available for distribution to unsecured cred  ☐ Debtor estimates that, after any exempt property is excluded and administrative there will be no funds available for distribution to unsecured creditors.					es paid,		THIS	SPACE IS	FOR COURT USE ONLY	
Estimated Number of Credito  1- 50- 100 49 99 199	200-	1,000- 5,000	5,001-	10,001-	25,001- 50,000	50,001- 100,000	OVER 100,000			
	0,001 to \$500,001 0,000 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50	\$50,000,001 to \$100	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion			
	0,001 to \$500,001 0,000 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50	\$50,000,001 to \$100	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion			

B1 (Official Form 1)(04/13) Page 2

Voluntary	Voluntary Petition  Name of Debtor(s): Smith, Clifford S.						
(This nage mus	t be completed and filed in every case)	Smith, Nicole Y.					
(1ms page mas	All Prior Bankruptcy Cases Filed Within Last	<u> </u>	ditional sheet)				
Location	Thi Thoi Bankrupecy Cases Thea William East	Case Number:	Date Filed:				
Where Filed:	- None -						
Location Where Filed:		Case Number:	Date Filed:				
Pen	ding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more than	one, attach additional sheet)				
Name of Debto - None -	r:	Case Number:	Date Filed:				
District:		Relationship:	Judge:				
	Exhibit A	Exhibit B  (To be completed if debtor is an individual whose debts are primarily consumer debts.)					
forms 10K an pursuant to Se	eted if debtor is required to file periodic reports (e.g., d 10Q) with the Securities and Exchange Commission ection 13 or 15(d) of the Securities Exchange Act of 1934 ting relief under chapter 11.)	12, or 13 of title 11, United States Cod	in the foregoing petition, declare that I she] may proceed under chapter 7, 11, e, and have explained the relief available fy that I delivered to the debtor the notice				
☐ Exhibit A	A is attached and made a part of this petition.	X /s/ Vance P. Truman Signature of Attorney for Debtor(s)	December 5, 2014 (Date)				
		Vance P. Truman 0061526					
	Exh	ibit C					
	own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	pose a threat of imminent and identifiable	harm to public health or safety?				
	Exh	ibit D					
Exhibit II  If this is a join	_	a part of this petition.	separate Exhibit D.)				
Exhibit I	D also completed and signed by the joint debtor is attached a	and made a part of this petition.					
	Information Regardin (Check any ap	_					
	Debtor has been domiciled or has had a residence, principal days immediately preceding the date of this petition or for	al place of business, or principal assets					
	There is a bankruptcy case concerning debtor's affiliate, ge	eneral partner, or partnership pending	in this District.				
	Debtor is a debtor in a foreign proceeding and has its princ this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	in the United States but is a defendar ne interests of the parties will be served	t in an action or d in regard to the relief				
	Certification by a Debtor Who Reside (Check all appl		ty				
	Landlord has a judgment against the debtor for possession	of debtor's residence. (If box checked,	complete the following.)				
	(Name of landlord that obtained judgment)	<u> </u>					
	(Address of landlord)	<del></del>					
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment f						
	Debtor has included with this petition the deposit with the after the filing of the petition.	court of any rent that would become of	lue during the 30-day period				
	Debtor certifies that he/she has served the Landlord with the	nis certification. (11 U.S.C. § 362(l)).					

B1 (Official Form 1)(04/13)

Page 3

Voluntary	Petition
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(This page must be completed and filed in every case)

#### Smith, Nicole Y.

## Signatures Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s): Smith, Clifford S.

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Λ	
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Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

٠	r	7		

### Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Clifford S. Smith

Signature of Debtor Clifford S. Smith

X /s/ Nicole Y. Smith

Signature of Joint Debtor Nicole Y. Smith

Telephone Number (If not represented by attorney)

December 5, 2014

Date

#### Signature of Attorney\*

X /s/ Vance P. Truman

Signature of Attorney for Debtor(s)

Vance P. Truman 0061526

Printed Name of Attorney for Debtor(s)

Vance P. Truman, Attorney at Law

Firm Name

689 Lafayette Road Medina, OH 44256

Address

Email: medinaatty@yahoo.com

(330) 722-8877 Fax: (330) 722-3410

Telephone Number

December 5, 2014

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### **Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 $\mathbf{X}$ 

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

B 1D (Official Form 1, Exhibit D) (12/09)

### United States Bankruptcy Court Northern District of Ohio

In re	Clifford S. Smith Nicole Y. Smith		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- ☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
Active inintary duty in a minuary combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Clifford S. Smith
Clifford S. Smith
Date: December 5, 2014

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B 1D (Official Form 1, Exhibit D) (12/09)

### United States Bankruptcy Court Northern District of Ohio

In re	Clifford S. Smith Nicole Y. Smith		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.
- ☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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☐ 4. I am not required to receive a credit co	unseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for	determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C.	§ 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of re	ealizing and making rational decisions with respect to
financial responsibilities.);	
1 //	§ 109(h)(4) as physically impaired to the extent of being
· · · · · · · · · · · · · · · · · · ·	e in a credit counseling briefing in person, by telephone, or
through the Internet.);	
☐ Active military duty in a military	comhat zone
and the state of t	Comour Zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	y administrator has determined that the credit counseling
requirement of 11 c.s.e. § 105(n) does not apply n	i tiib distret.
I certify under penalty of perjury that the	e information provided above is true and correct.
Signature of Debtor:	/s/ Nicole Y. Smith
	Nicole Y. Smith
Date: December 5, 2	2014

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### United States Bankruptcy Court Northern District of Ohio

In re	Clifford S. Smith,		Case No		
	Nicole Y. Smith				
_		Debtors	Chapter	7	

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	148,630.00		
B - Personal Property	Yes	3	42,187.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		181,712.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	13		78,242.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			5,036.99
J - Current Expenditures of Individual Debtor(s)	Yes	2			5,005.00
Total Number of Sheets of ALL Schedules		26			
	To	otal Assets	190,817.00		
			Total Liabilities	259,954.00	

### United States Bankruptcy Court Northern District of Ohio

In re	Clifford S. Smith,		Case No.		
	Nicole Y. Smith				
_		Debtors	Chapter	7	

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

#### State the following:

Average Income (from Schedule I, Line 12)	5,036.99
Average Expenses (from Schedule J, Line 22)	5,005.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	7,337.00

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		33,082.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		78,242.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		111,324.00

1	n	re

Clifford S. Smith, Nicole Y. Smith

Case No.		

#### Debtors

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property  Husband, Wife, Joint, or Community		Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim	
1192 Substation Road, Brunswick OH 44212 Parcel # 001-02A-27-011	FEE SIMPLE	Н	148,630.00	181,712.00	

Sub-Total > 148,630.00 (Total of this page)

Total > 148,630.00

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

•

In	re	

Clifford S. Smith, Nicole Y. Smith

Debtors

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Χ			
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Fifth <sup>-</sup>	Third Bank (Checking)	J	50.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.	House	ehold Goods	J	4,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.	Clothi	ing	J	400.00
7.	Furs and jewelry.	Χ			
8.	Firearms and sports, photographic, and other hobby equipment.	Χ			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issuer.	X			

2 continuation sheets attached to the Schedule of Personal Property

4,450.00

Sub-Total >

(Total of this page)

In re	Clifford S. Smith
	Nicole Y Smith

#### Debtors

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	Roth IRA		Н	30,000.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	Х			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	Child Suppo	rt \$500.00 per month	J	0.00
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	Χ			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
				Sub-Tota	al > 30,000.00
			(*)	Total of this page)	

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

•		
In	re	

Clifford S. Smith, Nicole Y. Smith

#### Debtors

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Χ			
23.	Licenses, franchises, and other general intangibles. Give particulars.	Χ			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and	20	000 Chevy Silverado Extended Cab 110,000 Miles	Н	5,645.00
	other vehicles and accessories.	20	006 Chyrsler Town & Country 105,000 Miles	W	2,092.00
26.	Boats, motors, and accessories.	Χ			
27.	Aircraft and accessories.	Χ			
28.	Office equipment, furnishings, and supplies.	Χ			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	Χ			
31.	Animals.	Χ			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	Χ			
34.	Farm supplies, chemicals, and feed.	Χ			
35.	Other personal property of any kind not already listed. Itemize.	Х			

Sub-Total > 7,737.00 (Total of this page)

Total >

42,187.00

Sheet 2 of 2 continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re

Clifford S. Smith, Nicole Y. Smith

### Debtors

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafted
☐ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
11 U.S.C. 8522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption	
Real Property 1192 Substation Road, Brunswick OH 44212 Parcel # 001-02A-27-011	Ohio Rev. Code Ann. § 2329.66(A)(1)	132,900.00	148,630.00	
Checking, Savings, or Other Financial Accounts, Certific Fifth Third Bank (Checking)	Cicates of Deposit Ohio Rev. Code Ann. § 2329.66(A)(3)	50.00	50.00	
Household Goods and Furnishings Household Goods	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	4,000.00	4,000.00	
Wearing Apparel Clothing	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	400.00	400.00	
Interests in IRA, ERISA, Keogh, or Other Pension or PRoth IRA	rofit Sharing Plans Ohio Rev. Code Ann. § 2329.66(A)(10)(b)	30,000.00	30,000.00	
Automobiles, Trucks, Trailers, and Other Vehicles 2000 Chevy Silverado Extended Cab 110,000 Miles	Ohio Rev. Code Ann. § 2329.66(A)(2)	3,675.00	5,645.00	
2006 Chyrsler Town & Country 105,000 Miles	Ohio Rev. Code Ann. § 2329.66(A)(2)	2,092.00	2,092.00	

Total:	173 117 00	190 817 00

Clifford S. Smith, Nicole Y. Smith

**Debtors** 

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

				_				
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H H	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COXF_ZGEZ	UZ L Q U L D A F H D	ΙEΙ	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 229514230			Opened 12/15/10 Last Active 11/03/14					
Bk Of Amer 1800 Tapo Canyon Rd Simi Valley, CA 93063		Н	Mortgage  1192 Substation Road, Brunswick OH  44212 Parcel # 001-02A-27-011		D			
			Value \$ 148,630.00				180,718.00	32,088.00
Account No. 247104079			Opened 2/01/14 Last Active 10/01/14					
Global Con 5320 College Blvd. Overland Park, KS 66211		J	1192 Substation Road, Brunswick OH 44212 Parcel # 001-02A-27-011					
			Value \$ 148,630.00				994.00	994.00
Account No.			Value \$					
Account No.								
			Value \$					
_0 continuation sheets attached	Subtotal (Total of this page) 181,712.00 33,082.00							
	Total 181,712.00 33,082.0 (Report on Summary of Schedules)					33,082.00		

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- 1	n	re

Clifford S. Smith, Nicole Y. Smith

Debtors

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

total also on the Statistical Summary of Certain Liabilities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in $11\ U.S.C.\ \S\ 507(a)(1)$ .
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

0 continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re	Clifford S. Smith, Nicole Y. Smith		Case No.	
_	NICOIC 1. OITHUI	Debtors		

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

 $\square$  Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	Ηι	sband, Wife, Joint, or Community	Č	U	Ŀ	ЭТ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONFINGEN	Q U	Į	J T	AMOUNT OF CLAIM
Account No. 4885960130			Opened 12/21/05 Last Active 5/22/06	T	T E D			
Affiliated Po Box 790001 Sunrise Beach, MO 65079		Н	Installment Sales Contract		D			0.00
Account No3499913347043353		T	Opened 6/02/06 Last Active 11/01/14	t	Г	T	†	
Amex Po Box 297871 Fort Lauderdale, FL 33329		Н	Credit Card					4,074.00
Account No. 3499907441663583		T	Opened 2/25/04		Г	T	T	
Amex Po Box 297871 Fort Lauderdale, FL 33329		Н	Credit Card					Unknown
Account No. 000051235024668			Opened 5/17/07 Last Active 10/01/14		Н	H	$\dagger$	
Barclays Bank Delaware 125 S West St Wilmington, DE 19801		W	Credit Card					4,306.00
12 continuation sheets attached		_		Sub	tota	ıl	†	8,380.00
commutation sheets attached			(Total of t	his	pag	ze)	) [	0,300.00

In re	Clifford S. Smith,	Case No.
	Nicole Y. Smith	

		_			_	_	_	
CREDITOR'S NAME,	000		sband, Wife, Joint, or Community	-	)   C	۱ ۱	D	
MAILING ADDRESS INCLUDING ZIP CODE,	ОДШВНО	H W	DATE CLAIM WAS INCURRED AND	1		.	S P U T E	
AND ACCOUNT NUMBER	TO	J	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		۱ ( ا (	ارُ	Ť	AMOUNT OF CLAIM
(See instructions above.)	Ř			Ě		2	D	
Account No. 000138305703507			Opened 7/22/11 Last Active 10/01/14	7	N /	[		
			Credit Card	ŀ	- [	4		
Barclays Bank Delaware 125 S West St		  H						
Wilmington, DE 19801		l						
								4,103.00
Account No. 000152933747426			Opened 5/28/12			T		
			Credit Card					
Barclays Bank Delaware 125 S West St		Н						
Wilmington, DE 19801								
								0.00
Account No. 169601-0105428162			Opened 6/01/03 Last Active 12/01/03			T		
			Charge Account					
Best Buy Retail Services		  H						
P.O. Box 15521		ļ.,						
Wilmington, DE 19850-5521								
								0.00
Account No. 4223			Opened 6/24/05 Last Active 11/05/14			T		
Dk Of Amor			Credit Card					
Bk Of Amer Po Box 982235		J						
El Paso, TX 79998								
								0.00
Account No. 4264281798939996			Opened 10/31/06 Last Active 11/17/08			T		
Die Of Amon			Credit Card					
Bk Of Amer Po Box 982235		Н						
El Paso, TX 79998								
		L						0.00
Sheet no. <u>1</u> of <u>12</u> sheets attached to Schedule of				Su			- 1	4,103.00
Creditors Holding Unsecured Nonpriority Claims			(Total	of this	s pa	ıge	)	4,103.00

In re	Clifford S. Smith,	Case No.
	Nicole Y. Smith	

CREDITOR'S NAME,	C	Ηι	sband, Wife, Joint, or Community		U	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M		COXH_XGEX	ГЬ	D I S P U T E D	AMOUNT OF CLAIM
Account No. 5490995694092732			Opened 2/11/02 Last Active 5/01/08	Т	ΙĒ		
Bk Of Amer Po Box 982235 El Paso, TX 79998		Н	Credit Card		D		0.00
Account No. 5437030690972574	t	$\vdash$	Opened 11/22/96 Last Active 11/01/14	+	H	$\vdash$	1
Cap One 26525 N Riverwoods Blvd Mettawa, IL 60045		J	Credit Card				3,384.00
	╀	-	0 10/00/00 1 10/01/14	+	╀	╄	
Account No. 6011380034917534  Cap One 26525 N Riverwoods Blvd Mettawa, IL 60045		w	Opened 2/28/08 Last Active 10/01/14 Credit Card				906.00
Account No. 5256502306091914			Opened 6/26/08 Last Active 10/21/08			Г	
Ccmk/Cbna Po Box 6497 Sioux Falls, SD 57117		н	Credit Card				Unknown
Account No. 4266810106380804			Opened 8/25/94 Last Active 11/01/14	T	Г	Т	
Chase Po Box 15298 Wilmington, DE 19850		Н	Credit Card				7,868.00
Sheet no. 2 of 12 sheets attached to Schedule of				Subt			12,158.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	his	pag	ge)	12,100.00

In re	Clifford S. Smith,	Case No.
	Nicole Y. Smith	

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CREDITOR'S NAME,	C	Ηι	sband, Wife, Joint, or Community		CO	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED ANI CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE	O AIM E.		UNLIQUIDA	SPUTED	AMOUNT OF CLAIM
Account No. 4262905104012328			Opened 6/13/03 Last Active 11/01/14		Τ	T E		
Chase Po Box 15298 Wilmington, DE 19850		Н	Credit Card			D		2,700.00
Account No. 6011644326366621			Opened 5/17/10 Last Active 2/04/13					
Chld/Cbna Po Box 6497 Sioux Falls, SD 57117		W	Charge Account					0.00
Account No. 133827198691446	T		Opened 3/21/09 Last Active 4/17/13					
Comenity Bank/Avenue Po Box 182789 Columbus, OH 43218		W	Charge Account					0.00
Account No. 5856372443538928	╁		Opened 3/31/11 Last Active 9/07/13					
Comenity Bank/Dressbrn Po Box 182789 Columbus, OH 43218	-	W	Charge Account					0.00
Account No. 6004668071559386	Γ		Opened 2/17/12 Last Active 11/06/12					
Comenity Bank/Fashbug Po Box 182272 Columbus, OH 43218		W	Charge Account					0.00
Sheet no3 of _12_ sheets attached to Schedule of					ıbt			2,700.00
Creditors Holding Unsecured Nonpriority Claims			(To	otal of th	is p	oag	e)	2,700.00

In re	Clifford S. Smith,	Case No.
	Nicole Y. Smith	

CREDITOR'S NAME,	C	Нι	sband, Wife, Joint, or Community		CON	U	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED A CONSIDERATION FOR CLAIM. IF O IS SUBJECT TO SETOFF, SO STA	CLAIM	OXT L Z G E Z	UNLLQULDA	U T E	AMOUNT OF CLAIM
Account No. 6978005006130482			Opened 5/14/09 Last Active 11/01/14		Т	D A T E D		
Comenity Bank/Lnbryant 4590 E Broad St Columbus, OH 43213		W	Charge Account			D		1,151.00
Account No. 9415 71831705	T		Opened 7/10/99					
Comenity Bank/Lnbryant Po Box 182789 Columbus, OH 43218		W	Charge Account					0.00
- N. 0044005440000400	┡		0 140/40/90 1 44/90/44					0.00
Account No. 6011005110803429  Discover Fin Svcs Llc Po Box 15316  Wilmington, DE 19850	-	J	Opened 10/12/93 Last Active 11/02/14 Credit Card					6,677.00
Account No. 6011005739055096	T		Opened 3/10/06 Last Active 12/30/10					
Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850		Н	Credit Card					0.00
Account No. 5467000152151705	t	H	Opened 11/26/04 Last Active 11/01/14					
Fifth Third Bank 5050 Kingsley Dr Cincinnati, OH 45227		Н	Credit Card					11,517.00
Sheet no. 4 of 12 sheets attached to Schedule of					ubt			19,345.00
Creditors Holding Unsecured Nonpriority Claims				(Total of the	nis j	pag	e)	10,010.00

In re	Clifford S. Smith,	Case No.
	Nicole Y. Smith	

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CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community		CO	U N	D I	
MAILING ADDRESS	СОПШВНОК	Н	DATE CLAIM WAS INCURRED AN	m	HZOO	ロストーなり	S P	
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLA		111	Q	U T E	ANALINE OF CLARA
AND ACCOUNT NUMBER (See instructions above.)	0	C	IS SUBJECT TO SETOFF, SO STAT		G	1	Ė	AMOUNT OF CLAIM
(See instructions above.)	R	ľ			ZGHZH	DATED	D	
Account No. 5467000152067117			Opened 4/07/03 Last Active 7/12/06		T	T		
			Credit Card			Ď		
Fifth Third Bank								
5050 Kingsley Dr		Н						
Cincinnati, OH 45227								
011011111du, 011 10227								
								0.00
								0.00
Account No. 17223339			Opened 6/09/14 Last Active 1/01/14					
			Collection Attorney Podiatry Llc					
First Federal Credit C								
24700 Chagrin Blvd Ste 2		W						
Cleveland, OH 44122								
·								
								27.00
Account No. 3080120312			Opened 4/25/05 Last Active 9/11/06					
			Charge Account					
Kay Jewelers								
375 Ghent Rd		Н						
Fairlawn, OH 44333								
								0.00
Account No. 6393050722218047			Opened 8/11/13 Last Active 11/03/14					
Account No. 0393030722218047			Charge Account					
K-h-/0-n-n-			Charge Account					
Kohls/Capone		lw						
N56 W 17000 Ridgewood Dr		l۷۷						
Menomonee Falls, WI 53051								
								125.00
Account No. 6393050394315469			Opened 7/09/04 Last Active 5/09/13					
212111111111111111111111111111111111111			Charge Account					
Kohls/Capone			<u> </u>					
N56 W 17000 Ridgewood Dr		Н						
Menomonee Falls, WI 53051								
								0.00
								0.00
Sheet no. <u>5</u> of <u>12</u> sheets attached to Schedule of				S	ubt	ota	l	450.00
Creditors Holding Unsecured Nonpriority Claims			T)	otal of th	is 1	oag	e)	152.00

In re	Clifford S. Smith,	Case No.
	Nicole Y. Smith	

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CREDITOR'S NAME,	CO	Ηι	sband, Wife, Joint, or Community			U N	D	
MAILING ADDRESS INCLUDING ZIP CODE,	ODEBTO	H W	DATE CLAIM WAS INCURRED AND	N T		N L I Q U	SPUTE	
AND ACCOUNT NUMBER	B T	J	CONSIDERATION FOR CLAIM. IF CLAIM	1   1	1	Q U	U T	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.			Ď	D	
Account No. 6393050520272394			Opened 9/22/08 Last Active 5/06/12	î	1	D A T E D		
			Charge Account	L	1	Ď		
Kohls/Capone		l. <u>.</u>						
N56 W 17000 Ridgewood Dr		W						
Menomonee Falls, WI 53051								
								0.00
Account No. 6978005006130482		H	Opened 5/14/09 Last Active 12/10/09		$\dagger$	$\forall$		
			Credit Card					
Lane Bryant Retail/Soa		lw						
450 Winks Ln Bensalem, PA 19020		٧v						
Densalem, PA 19020								
								0.00
Account No. 4120614056088235			Opened 11/18/11 Last Active 11/01/14		Ť	$\forall$		
			Credit Card					
Merrick Bank Po Box 9201		lw						
Old Bethpage, NY 11804		۱°°						
Old Bollipago, IVI Troot								
								1,344.00
Account No. 6011549108496589			Opened 7/09/13 Last Active 1/26/14			T		
Nith (Chara			Charge Account					
Ntb/Cbna Po Box 6497		Н						
Sioux Falls, SD 57117								
·								
								0.00
Account No.			Charge Account					
Paypal Corporate Headquarters								
2211 North First Street		J						
San Jose, CA 95131								
								Unknown
Sheet no. 6 of 12 sheets attached to Schedule of				Sul				1,344.00
Creditors Holding Unsecured Nonpriority Claims			(Tota	of this	s p	age	e)	.,5 :50

In re	Clifford S. Smith,	Case No.
	Nicole Y. Smith	

	-			- 1.	_		_	
CREDITOR'S NAME,	CODEBTOR	Hu	sband, Wife, Joint, or Community	{	200	UNLLQU	D I	
MAILING ADDRESS	D	н	DATE CLAIM WAS INCURRED AND	1	1	Ļ	S P	
INCLUDING ZIP CODE,	B	w	CONSIDERATION FOR CLAIM. IF CLAIM	r II		Q	ΰ	13.601.DVT OF GV 1.D.6
AND ACCOUNT NUMBER	6	C	IS SUBJECT TO SETOFF, SO STATE.		3	1	U T E	AMOUNT OF CLAIM
(See instructions above.)	R	ľ	,	I (	<u> </u>	D A T E D	D	
Account No. 5121075041603072			Opened 12/08/04 Last Active 12/28/10	7	ŕ	Ţ		
	ı		Credit Card			Ď		
Sears/Cbna	l				T			
Po Box 6283	l	Н						
Sioux Falls, SD 57117	l							
Gloax Fallo, GD GT TT	l							
	l							0.00
	L							0.00
Account No. 504994810767	l		Opened 6/20/00 Last Active 12/03/02					
	l		Charge Account					
Sears/Cbna	l							
Po Box 6189	l	Н						
Sioux Falls, SD 57117	l							
	l							
	l							Unknown
					_	_		0111010111
Account No. 98028549171000120000928	ı		Opened 9/28/00 Last Active 6/10/08					
	l		Educational					
Slm Financial Corp	l							
11100 Usa Pkwy	l	W						
Fishers, IN 46037	l							
	l							
	l							0.00
A	⊢	H	On an add 40/00/00   Last Astines   0/40/00		+	$\dashv$		
Account No. 98028549171000219991028	l		Opened 10/28/99 Last Active 6/10/08					
	l		Educational					
Slm Financial Corp	l	١						
11100 Usa Pkwy	l	W						
Fishers, IN 46037	l							
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Account No. 98028549171000320010709	┢		Opened 7/09/01 Last Active 6/10/08	_	+	1		
710000000 TVO. 3002034317 1000320010703	ı		Educational					
Olas Fissassial Osaa	l		Luddional					
SIm Financial Corp	l	١,,,						
11100 Usa Pkwy	l	lw						
Fishers, IN 46037	ı							
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Sheet no7 of _12_ sheets attached to Schedule of		_		Su	hte	ntal		
Creditors Holding Unsecured Nonpriority Claims			(Tata	of this				0.00
Creditors riolating Onsecured Nonpriority Claims			(10ta	or uns	s p	age	ا (ت	

In re	Clifford S. Smith,	Case No.
	Nicole Y. Smith	

	-			- 1		1	_	
CREDITOR'S NAME,	CODEBTOR	Hi	sband, Wife, Joint, or Community	——	201	UNLLQU	D	
MAILING ADDRESS	D	Н	DATE CLAIM WAS INCURRED AND	1	1	ĻΙ	S	
INCLUDING ZIP CODE,	₽	l w	CONSIDERATION FOR CLAIM. IF CLAIM	- 11		ġ	ņ	ANALINE OF CLARA
AND ACCOUNT NUMBER	6	C	IS SUBJECT TO SETOFF, SO STATE.		3 l	1	U E	AMOUNT OF CLAIM
(See instructions above.)	R	ľ			[	D A T E D	D	
Account No. 98028549171000420020823			Opened 8/23/02 Last Active 6/10/08		·	Ţ		
	ı		Educational			Ď		
Slm Financial Corp	l				T			
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Fishers, IN 46037	l							
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Account No. 98028549171000520020823			Opened 8/23/02 Last Active 6/10/08		T			
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Fishers, IN 46037	l							
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Account No. 287641850101F			Opened 9/28/00 Last Active 9/29/05		T			
	ı		Student Loan					
Sm Servicing	l							
11100 Usa Parkway	l	l٧	,					
Fishers, IN 46038	l							
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Account No. 287641850102F			Opened 10/28/99 Last Active 9/29/05					
	1		Student Loan					
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11100 Usa Parkway	l	l۷	/					
Fishers, IN 46038	l							
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Account No. 287641850103F	l		Opened 7/09/01 Last Active 9/29/05					
	l		Student Loan					
Sm Servicing	l							
11100 Usa Parkway	l	W	1					
Fishers, IN 46038	l							
	ı							
	ı							0.00
		_						
Sheet no. <u>8</u> of <u>12</u> sheets attached to Schedule of				Su				0.00
Creditors Holding Unsecured Nonpriority Claims			(Total	of this	s p	ag	e)	0.00

In re	Clifford S. Smith,	Case No.
	Nicole Y. Smith	

							_	
CREDITOR'S NAME,	CO	Нι	sband, Wife, Joint, or Community		U	]	5	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M		C O N T I N G E N T	I U		3 J T E D	AMOUNT OF CLAIM
Account No. 287641850104F			Opened 8/23/02 Last Active 9/29/05	T	A T E D		Ī	
Sm Servicing 11100 Usa Parkway Fishers, IN 46038		W	Student Loan		D			0.00
Account No. 287641850105F			Opened 8/23/02 Last Active 9/29/05	T	T	T	7	
Sm Servicing 11100 Usa Parkway Fishers, IN 46038		W	Student Loan					0.00
Account No. 6045781011257382			Opened 12/02/11 Last Active 11/01/14	+	+	+	$\dashv$	
Syncb/Amazon Po Box 965015 Orlando, FL 32896		W	Charge Account					720.00
Account No. 534819000389			Opened 1/03/95 Last Active 11/29/02	T	T	T	7	
Syncb/Best Buy C/O Po Box 965036 Orlando, FL 32896		J	Charge Account					Unknown
Account No. 6019183088669908			Opened 6/14/12 Last Active 11/01/14	T	T	†	$\dagger$	
Syncb/Care Credit 950 Forrer Blvd Kettering, OH 45420		Н	Charge Account					126.00
Sheet no. 9 of 12 sheets attached to Schedule of				Sub				846.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	) [	

In re	Clifford S. Smith,	Case No.
	Nicole Y. Smith	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community		U	P	
MAILING ADDRESS	CODEBTOR	н	DATE CLAIM WAS INCURRED AND	CONT	Ļ	D I S P U T E	
INCLUDING ZIP CODE,	B	W	CONSIDERATION FOR CLAIM. IF CLAIM		Q	Įΰ	AMOUNT OF CLAIM
AND ACCOUNT NUMBER (See instructions above.)	o	C	IS SUBJECT TO SETOFF, SO STATE.	G	Ī	Ė	AMOUNT OF CLAIM
	R			I N G E N T	11)	D	
Account No. 604587080981	l		Opened 5/01/95 Last Active 2/27/99	Т	A T E D		
	1		Charge Account	<u> </u>	D		
Syncb/Dillards	l						
Po Box 965024	l	W					
Orlando, FL 32896	l						
	l						
	l						Unknown
Account No. 4479941307436401	t	H	Opened 8/15/08 Last Active 11/01/14	$\top$	T	T	
	ł		Credit Card				
Syncb/Gapdc	l						
Po Box 965005	l	w					
Orlando, FL 32896	l						
	l						
	l						1,177.00
Account No. 6008893407400120	┝	H	Opened 9/04/05 Last Active 10/01/14	+	$\vdash$	╁	
Account 100. 00000950407400120	ł		Charge Account				
Syncb/Jcp	l		onalgo / locount				
Po Box 965007	l	lw					
Orlando, FL 32896	l	' '					
Chando, 1 E 32000	l						
	l						1,259.00
	┡			+	_	_	1,200.00
Account No. 6008893418423319	1		Opened 8/04/13 Last Active 11/05/14				
	l		Charge Account				
Syncb/Jcp	l	$ _{w}$					
Po Box 965007	l	۱۷۷					
Orlando, FL 32896	l						
	l						337.00
	L			丄			337.00
Account No. 6008891105868929			Opened 6/08/93 Last Active 11/20/97				
			Charge Account				
Syncb/Jcp	I	<b>\</b>					
Po Box 965007	1	١w					
Orlando, FL 32896							
		$\perp$			L		0.00
Sheet no. 10 of 12 sheets attached to Schedule of				Sub	tota	ıl	0.770.65
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	2,773.00

In re	Clifford S. Smith,	Case No.
	Nicole Y. Smith	

	_	_			_	_		,
CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community		C O	U N	D	
MAILING ADDRESS INCLUDING ZIP CODE,	ОДШВНО	H W	DATE CLAIM WAS INCURRED AND		Ň	N L Q U	SPUTE	
AND ACCOUNT NUMBER	L	J	CONSIDERATION FOR CLAIM. IF CLAI IS SUBJECT TO SETOFF, SO STATE.	M	N	Ü	Ţ	AMOUNT OF CLAIM
(See instructions above.)	R	С	is subsect to setorit, so state.		I N G E N T	b A	D	
Account No. 6019180239400142			Opened 8/12/14 Last Active 10/01/14		Ť	D A T E D		
			Charge Account	-	_	D		
Syncb/Napa Easy Pay		H						
950 Forrer Blvd Kettering, OH 45420		''						
Noticinity, Off 40420								
								812.00
Account No. 6018596360860740			Opened 10/02/06 Last Active 10/01/14					
			Charge Account					
Syncb/Old Navy Po Box 965005		  H						
Orlando, FL 32896		l						
,								
								3,025.00
Account No. 6018596396942132			Opened 8/07/11 Last Active 4/29/12					
			Charge Account					
Syncb/Old Navy Po Box 965005		lw						
Orlando, FL 32896								
								0.00
Account No. 6032201451399847			Opened 12/02/11 Last Active 11/01/14					
Cura ele AMalera a et			Charge Account					
Syncb/Walmart Po Box 965024		lw						
Orlando, FL 32896								
								1,467.00
Account No. 4352378339721603			Opened 5/16/02 Last Active 1/01/04		T			
Toward Nile			Credit Card					
Target Nb Po Box 673		Н						
Minneapolis, MN 55440								
								0.00
Sheet no11_ of _12_ sheets attached to Schedule of				Su				5,304.00
Creditors Holding Unsecured Nonpriority Claims			(Tot	al of thi	s p	ag	e)	3,304.00

In re	Clifford S. Smith,	Case No.
	Nicole Y. Smith	

CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community		U	[	РΤ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	Z L Q U L D A	F F U	SPUTED	AMOUNT OF CLAIM
Account No. 6035320286277841			Opened 7/03/08 Last Active 12/29/10	Т	T E		ſ	
Thd/Cbna Po Box 6497 Sioux Falls, SD 57117		Н	Charge Account		D			0.00
Account No. 5491237075901903	T	T	Opened 9/01/00 Last Active 11/01/14			T	1	
Usaa Savings Bank Po Box 47504 San Antonio, TX 78265		Н	Charge Account					
								21,137.00
Account No.								
Account No.								
Account No.	ł							
Sheet no. <u>12</u> of <u>12</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	•		(Total of	Sub this			)	21,137.00
			(Report on Summary of S		Tota dula		, [	78,242.00

In re

Clifford S. Smith, Nicole Y. Smith

Debtors

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. In re

Clifford S. Smith, Nicole Y. Smith

Debtors

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Fill in this information	to identify your case:	
Debtor 1	Clifford S. Smith	
Debtor 2 (Spouse, if filing)	Nicole Y. Smith	
United States Bankru	ptcy Court for the: NORTHERN DISTRICT OF OHIO	
Case number (If known)		Check if this is: ☐ An amended filing ☐ A supplement showing post-petition chapter
Official Form	n B 6I	13 income as of the following date:  MM / DD/ YYYY
	Your Income	12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Describe Employment** Part 1: Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Police Officer Teacher Include part-time, seasonal, or **Employer's name** City of Brunswick Harmony Pre-School self-employed work. **Employer's address** Occupation may include student or homemaker, if it applies. How long employed there? 15 Years 2 Years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 6,270.33 1,063.83 2. deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 6,270.33 1,063.83

Debtor 1 Debtor 2 Clifford S. Smith Nicole Y. Smith

le Y. Smith Case number (if known)

				For	Debtor 1		ebtor 2 or iling spouse	
	Сору	line 4 here	4.	\$	6,270.33	\$	1,063.83	
5.	List a	all payroll deductions:						
	5a. 5b. 5c. 5d. 5e. 5f. 5g.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5a. 5b. 5c. 5d. 5e. 5f.	\$ \$ \$ \$ \$ \$ \$ \$ \$	1,560.00 684.67 0.00 0.00 346.67 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	205.83 0.00 0.00 0.00 0.00 0.00 0.00	
6.	5h.	Other deductions. Specify:	— <sup>5h.+</sup> 6.	- \$ <u> </u>	0.00 - 2,591.34	+ \$ <u></u> \$	0.00	
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ <b>—</b>	3,678.99	\$ 	205.83 858.00	
8.		All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$ <del>-</del>		\$ \$	0.00	
	8b.	Interest and dividends	8b.	<sup>φ</sup> -	0.00	\$ <u> </u>	0.00	
	8c. 8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	8c. 8d. 8e.	\$_ \$_ \$_	0.00 0.00 0.00	\$ \$ \$	500.00 0.00 0.00	
		Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	— 8g.	\$-	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	500.00	]
10.		ulate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,678.99 + \$_	1,35	8.00 = \$	5,036.99
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not ify:	depen		. ,	•	hedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certales					Combine	
13.	Do yo	ou expect an increase or decrease within the year after you file this form  No.  Yes. Explain:	?				monthly	псоте

Fill in	this informa	ation to identify yo	our case:					
Debto	or 1	Clifford S. Sn	nith			Chec	k if this is:	
							An amended filing	
Debto		Nicole Y. Sm	ith					wing post-petition chapter
(Spou	use, if filing)						13 expenses as of	the following date:
United	d States Bank	ruptcy Court for the	: NORTH	IERN DISTRICT OF OHIO		_	MM / DD / YYYY	
Case (If kno	number						A separate filing fo 2 maintains a sepa	r Debtor 2 because Debtor rrate household
Off	ficial Fo	orm B 6J						
		J: Your	_ Evnor	NCOC				12/1:
Be as	s complete mation. If m ber (if know	and accurate as	s possible eded, atta ry questio	. If two married people ar ch another sheet to this				or supplying correct
1.	Is this a joi	nt case?						
	☐ No. Go to	o line 2.						
	Yes. Doe	es Debtor 2 live	in a separ	ate household?				
			-+ <i>t</i> :	causta Cabadula I				
	⊔ r	es. Debiol 2 mus	st lile a sep	parate Schedule J.				
2.	Do you hav	e dependents?	☐ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state				Daughter		6	□ No ■ Yes
	асренаета	names.			Dauginoi		· <u> </u>	□ No
					Daughter		7	■ Yes
								□ No
					Son		15	■ Yes
								☐ No
_	_							☐ Yes
	expenses of	penses include of people other t od your depende	han $\square$	No Yes				
expe	nate your e	a date after the	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the v		h assistance an		government assistance i luded it on <i>Schedule I:</i> )			Your exp	enses
		or home owners		ses for your residence. In	nclude first mortgage	4. \$		1,500.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner's	s, or renter	's insurance		4b. \$		0.00
		•		ıpkeep expenses		4c. \$		150.00
		eowner's associa				4d. \$		0.00
5.	Additional :	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$	<u> </u>	0.00

Debtor Debtor			Case numl	ber (if known)	
6. <b>Ut</b>	tilities:				
6. <b>G</b> t		heat, natural gas	6a.	\$	400.00
6b	•	ver, garbage collection	6b.		130.00
60		e, cell phone, Internet, satellite, and cable services	6c.	\$	350.00
60	•		6d.	\$	0.00
		ekeeping supplies	7.	\$	1,200.00
		hildren's education costs	8.	\$	0.00
		ry, and dry cleaning	9.	\$	200.00
	•	roducts and services	10.	·	150.00
	edical and der		11.		100.00
		Include gas, maintenance, bus or train fare.		·	100.00
	o not include ca		12.	\$	500.00
13. <b>E</b> r	ntertainment, d	clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14. <b>Cł</b>	haritable cont	ributions and religious donations	14.	\$	0.00
	surance.				
		surance deducted from your pay or included in lines 4 or 20.		_	
	5a. Life insura		15a.		0.00
	b. Health ins		15b.		0.00
	sc. Vehicle ins		15c.	·	125.00
	d. Other insu		15d.	\$	0.00
		clude taxes deducted from your pay or included in lines 4 or 20.	40	•	
	pecify:		16.	\$	0.00
		ease payments: ents for Vehicle 1	17a.	\$	0.00
			17a. 17b.		0.00
		ents for Vehicle 2			0.00
	c. Other. Spe		17c. 17d.	\$	0.00
	d. Other. Spe			<b>a</b>	0.00
		of alimony, maintenance, and support that you did not report a your pay on line 5, Schedule I, Your Income (Official Form 6I).	<b>s</b> 18.	\$	0.00
		s you make to support others who do not live with you.		\$	0.00
	pecify:	, you make to cappoin outside mile at hearing mile you.	19.	<u> </u>	0.00
		erty expenses not included in lines 4 or 5 of this form or on Sch		our Income.	
		on other property	20a.		0.00
20	b. Real estate	e taxes	20b.	\$	0.00
20	c. Property, h	nomeowner's, or renter's insurance	20c.	\$	0.00
20	d. Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
20	e. Homeown	er's association or condominium dues	20e.	\$	0.00
21. <b>O</b> 1	ther: Specify:	Education expense for your child(ren) under 18	21.	+\$	100.00
00 V			20	r.	5 005 00
	-	xpenses. Add lines 4 through 21.	22.	\$	5,005.00
		r monthly expenses. nonthly net income.			
		12 (your combined monthly income) from Schedule I.	23a.	\$	5,036.99
		monthly expenses from line 22 above.	23b.		5,005.00
20	b. Copy your	monthly expenses from the 22 above.	200.	<u> </u>	5,005.00
23	Bc. Subtract v	our monthly expenses from your monthly income.			
		is your monthly net income.	23c.	\$	31.99
			•		
		an increase or decrease in your expenses within the year after y			or doorsoon because of a
		u expect to finish paying for your car loan within the year or do you expect you terms of your mortgage?	ur mortgage p	payment to increa	ise of decrease because of a
	No.	tomo o. you mongago.			
	l Yes.				
	r res. kplain:				

### United States Bankruptcy Court Northern District of Ohio

In re	Clifford S. Smith Nicole Y. Smith		Case No.				
		Debtor(s)	Chapter	7			
	DECLARATION CONCERNING DEBTOR'S SCHEDULES						

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of <u>28</u> sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date	December 5, 2014	Signature	/s/ Clifford S. Smith Clifford S. Smith Debtor
Date	December 5, 2014	Signature	/s/ Nicole Y. Smith Nicole Y. Smith Joint Debtor

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

## United States Bankruptcy Court Northern District of Ohio

In re	Clifford S. Smith Nicole Y. Smith		Case No.	
		Debtor(s)	Chapter	7

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE \$69,364.00 2014 YTD: Both Employment Income

\$94,222.00 2013: Both Employment Income \$84,501.00 2012: Both Employment Income

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

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#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS** 

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> **AMOUNT** DATES OF PAID OR PAYMENTS/

NAME AND ADDRESS OF CREDITOR

VALUE OF **TRANSFERS** TRANSFERS

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

AMOUNT STILL

**OWING** 

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF **PROCEEDING**  COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

 $<sup>^</sup>st$  Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

3

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR. IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE Vance P. Truman, Esq 689 Lafayette Road Medina, OH 44256 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 11/24/2014 AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$400.00

#### 10. Other transfers

None 

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE,

DESCRIBE PROPERTY TRANSFERRED DATE RELATIONSHIP TO DEBTOR AND VALUE RECEIVED 10/2014 Rob Janowik 2002 Harley-Davidson \$4,000.00

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

AMOUNT OF MONEY OR DESCRIPTION AND DATE(S) OF VALUE OF PROPERTY OR DEBTOR'S INTEREST DEVICE TRANSFER(S) IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

TYPE OF ACCOUNT. LAST FOUR DIGITS OF ACCOUNT NUMBER. NAME AND ADDRESS OF INSTITUTION AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY LOCATION OF PROPERTY

## 15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF **ENVIRONMENTAL** DATE OF SITE NAME AND ADDRESS GOVERNMENTAL UNIT LAW NOTICE

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF **ENVIRONMENTAL** DATE OF SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

6

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.



NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

## NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

7

#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None b. List the

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

## DATE OF INVENTORY

### 21 . Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

**ADDRESS** 

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

8

## 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	December 5, 2014	Signature	/s/ Clifford S. Smith Clifford S. Smith Debtor
Date	December 5, 2014	Signature	/s/ Nicole Y. Smith Nicole Y. Smith
			Joint Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

## United States Bankruptcy Court Northern District of Ohio

		Northern	district of Onio		
In re	Clifford S. Smith			Case No.	
III IE	Nicole Y. Smith		Debtor(s)	Chapter	7
	CHAPTER 7	INDIVIDUAL DEBT	OR'S STATEMEN	T OF INTEN	TION
PART	A - Debts secured by property property of the estate. Attac			eted for <b>EACH</b>	I debt which is secured by
Proper	ty No. 1				
Credit -NONE	tor's Name: =-		Describe Property	Securing Debt	:
	rty will be (check one):   Surrendered	☐ Retained			
	ining the property, I intend to (ch Redeem the property Reaffirm the debt Other. Explain		oid lien using 11 U.S.	C. § 522(f)).	
	rty is (check one): Claimed as Exempt		☐ Not claimed as ex	kempt	
	<b>B</b> - Personal property subject to additional pages if necessary.)	unexpired leases. (All three	ee columns of Part B m	oust be complete	ed for each unexpired lease.
Proper	rty No. 1				
Lessoi -NONE	r's Name: =-	Describe Leased Pa	roperty:	Lease will be U.S.C. § 365	Assumed pursuant to 11 (p)(2):
person Date	re under penalty of perjury that all property subject to an unexp  December 5, 2014	oired lease. Signature	/s/ Clifford S. Smith Clifford S. Smith Debtor	property of my	estate securing a debt and/or
Date _	December 5, 2014	Signature	/s/ Nicole Y. Smith Nicole Y. Smith Joint Debtor		

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## United States Bankruptcy Court Northern District of Ohio

In re	Clifford S. Smith  Nicole Y. Smith	Cas	e No.	
	Debto	C(s) Cha	pter	7
	DISCLOSURE OF COMPENSATION O	F ATTORNEY FO	R DE	CBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that paid to me within one year before the filing of the petition in bankruptcy, a behalf of the debtor(s) in contemplation of or in connection with the bankruptcy.	or agreed to be paid to me, f		
	For legal services, I have agreed to accept			1,000.00
	Prior to the filing of this statement I have received	\$		400.00
	Balance Due	\$		600.00
2.	\$335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensation with any	other person unless they are	e meml	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person copy of the agreement, together with a list of the names of the people			
6.	In return for the above-disclosed fee, I have agreed to render legal service	for all aspects of the bankro	iptcy c	ase, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs at</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation.</li> <li>d. [Other provisions as needed]</li> </ul>	nd plan which may be requi-	red;	
7.	By agreement with the debtor(s), the above-disclosed fee does not include	the following service:		
	CERTIFICAT	ION		
	I certify that the foregoing is a complete statement of any agreement or arr bankruptcy proceeding.	angement for payment to m	e for re	epresentation of the debtor(s) in
Date		nce P. Truman		
		P. Truman 0061526	014	_
	689 La	P. Truman, Attorney at Lafayette Road	_aw	
		a, OH 44256	2440	
		722-8877 Fax: (330) 722 aatty@yahoo.com	-3410	

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF OHIO

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

## 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

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#### Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

B 201B (Form 201B) (12/09)

## United States Bankruptcy Court Northern District of Ohio

	Clifford S. Smith			
In re	Nicole Y. Smith		Case No.	
		Debtor(s)	Chapter	7
	CERTIFICATION OF I UNDER § 342(b)	NOTICE TO CONSUN OF THE BANKRUPT		R(S)
Code.	Ce I (We), the debtor(s), affirm that I (we) have rec	rtification of Debtor eived and read the attached r	notice, as required	by § 342(b) of the Bankruptcy
	S. Smith Y. Smith	X /s/ Clifford S. S	Smith	December 5, 2014
Printed	l Name(s) of Debtor(s)	Signature of D	Debtor	Date
Case N	Jo. (if known)	X /s/ Nicole Y. S	mith	December 5, 2014
		Signature of J	oint Debtor (if any	) Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Best Case Bankruptcy

## United States Bankruptcy Court Northern District of Ohio

In re	Clifford S. Smith Nicole Y. Smith		Case No.
		Debtor(s)	Chapter 7
	VER	IFICATION OF CREDITOR	MATRIX
The ab	ove-named Debtors hereby verify	that the attached list of creditors is true and	correct to the best of their knowledge.
Date:	December 5, 2014	/s/ Clifford S. Smith	
		Clifford S. Smith	
		Signature of Debtor	
Date:	December 5, 2014	/s/ Nicole Y. Smith	
		Nicole Y. Smith	
		Signature of Debtor	

Affiliated Po Box 790001 Sunrise Beach, MO 65079

Amex Po Box 297871 Fort Lauderdale, FL 33329

Barclays Bank Delaware 125 S West St Wilmington, DE 19801

Best Buy Retail Services P.O. Box 15521 Wilmington, DE 19850-5521

Bk Of Amer 1800 Tapo Canyon Rd Simi Valley, CA 93063

Bk Of Amer Po Box 982235 El Paso, TX 79998

Cap One 26525 N Riverwoods Blvd Mettawa, IL 60045

Ccmk/Cbna Po Box 6497 Sioux Falls, SD 57117

Chase Po Box 15298 Wilmington, DE 19850

Chld/Cbna Po Box 6497 Sioux Falls, SD 57117

Comenity Bank/Avenue Po Box 182789 Columbus, OH 43218

Comenity Bank/Dressbrn Po Box 182789 Columbus, OH 43218

Comenity Bank/Fashbug Po Box 182272 Columbus, OH 43218

Comenity Bank/Lnbryant 4590 E Broad St Columbus, OH 43213

Comenity Bank/Lnbryant Po Box 182789 Columbus, OH 43218

Discover Fin Svcs Llc Po Box 15316 Wilmington, DE 19850

Fifth Third Bank 5050 Kingsley Dr Cincinnati, OH 45227

First Federal Credit C 24700 Chagrin Blvd Ste 2 Cleveland, OH 44122

Global Con 5320 College Blvd. Overland Park, KS 66211

Kay Jewelers 375 Ghent Rd Fairlawn, OH 44333

Kohls/Capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Lane Bryant Retail/Soa 450 Winks Ln Bensalem, PA 19020

Merrick Bank Po Box 9201 Old Bethpage, NY 11804

Ntb/Cbna Po Box 6497 Sioux Falls, SD 57117

Paypal Corporate Headquarters 2211 North First Street San Jose, CA 95131

Sears/Cbna Po Box 6283 Sioux Falls, SD 57117

Sears/Cbna Po Box 6189 Sioux Falls, SD 57117

Slm Financial Corp 11100 Usa Pkwy Fishers, IN 46037

Sm Servicing 11100 Usa Parkway Fishers, IN 46038

Syncb/Amazon Po Box 965015 Orlando, FL 32896

Syncb/Best Buy C/O Po Box 965036 Orlando, FL 32896

Syncb/Care Credit 950 Forrer Blvd Kettering, OH 45420

Syncb/Dillards Po Box 965024 Orlando, FL 32896 Syncb/Gapdc Po Box 965005 Orlando, FL 32896

Syncb/Jcp Po Box 965007 Orlando, FL 32896

Syncb/Napa Easy Pay 950 Forrer Blvd Kettering, OH 45420

Syncb/Old Navy Po Box 965005 Orlando, FL 32896

Syncb/Walmart Po Box 965024 Orlando, FL 32896

Target Nb Po Box 673 Minneapolis, MN 55440

Thd/Cbna
Po Box 6497
Sioux Falls, SD 57117

Usaa Savings Bank Po Box 47504 San Antonio, TX 78265

Fill in this information to identify your case:							
Debtor 1 Clifford S. Smith							
Debtor 2 (Spouse, if filing	Debtor 2 Nicole Y. Smith (Spouse, if filing)						
United States Ba	United States Bankruptcy Court for the: Northern District of Ohio						
Case number(if known)							

Check one box only as directed in this form and in Form 22A-1Supp:

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 22A-2).
- □ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

## Official Form 22A - 1

## **Chapter 7 Statement of Your Current Monthly Income**

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 22A-1Supp) with this form.

#### Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
  - ☐ Not married. Fill out Column A, lines 2-11.
  - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
  - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
    - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
    - □ Living separately or are legally separated. fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	_	olumn A ebtor 1	De	olumn B ebtor 2 or on-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$	6,272.00	\$_	1,065.00
<ol> <li>Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.</li> </ol>	\$	0.00	\$_	0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$_	0.00	\$_	0.00
5. Net income from operating a business, profession, or farm				
Gross receipts (before all deductions) \$ 0.00  Ordinary and necessary operating expenses -\$ 0.00  Net monthly income from a business, profession, or farm \$ 0.00  Copy here ->	<b>-</b> \$	0.00	\$	0.00
6. Net income from rental and other real property			-	
Gross receipts (before all deductions) \$0.00				
Ordinary and necessary operating expenses -\$ 0.00		0.55		
Net monthly income from rental or other real property \$0.00 Copy here ->	<b>-</b> \$ _	0.00	\$_	0.00
7. Interest, dividends, and royalties	\$	0.00	\$_	0.00

Official Form 22A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 1

Best Case Bankruptcy

Clifford S. Smith

Nicole Y. Smith	Cimera C. Cimar
	Nicole Y. Smith

Debto	Nicole Y. Smith			Case numbe	r ( <i>if known</i> )			
				Column A Debtor 1		Columi Debtor non-fil		•
8.	Unemployment compensation			\$	0.00	\$	0.00	)
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	t received was a bene	efit under		_			
	For you\$	C	.00					
	For your spouse \$	C	.00					
9.	<b>Pension or retirement income.</b> Do not include any ambenefit under the Social Security Act.	nount received that w	as a	\$	0.00	\$	0.00	<u>)                                    </u>
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total on line 10c.	Security Act or payme manity, or internation	nts al or					
	10a			\$	0.00	\$	0.00	<u>)                                    </u>
	10b			\$	0.00	\$	0.00	_
	10c. Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	<u>)                                    </u>
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the to		\$	6,272.00	+ _	1,065.0	<u>o</u> =s_	7,337.00
Part	2: Determine Whether the Means Test Applies t	o You					Tot ince	al current monthly ome
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	·		Сор	y line 11 l	nere=>	12a. \$	7,337.00
	Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of the	e form					12b. \$	88,044.00
13.	Calculate the median family income that applies to	you. Follow these ste	ps:					
	Fill in the state in which you live.	ОН						
	Fill in the number of people in your household.	5						
	Fill in the median family income for your state and size	of household.					13. \$	85,467.00
14	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, c	heck box	1, There is	no presum	ption of a	abuse.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 22A-2.	of page 1, check box	2, The pre	esumption of	fabuse is	determine	ed by Form	22A-2.
Part								
	By signing here, I declare under penalty of perjury	that the information	on this sta	atement and	in any atta	achments	is true and	correct.
	X /s/ Clifford S. Smith	Y	/s/ Nicol	le Y. Smith				
	Clifford S. Smith		Nicole Y					
	Signature of Debtor 1		-	e of Debtor 2				
	Date December 5, 2014  MM / DD / YYYY			oer 5, 2014 7 / YYYY				
	ואוואו / טט / וז ז ז		ואוואו / טט	,				

If you checked line 14a, do NOT fill out or file Form 22A-2.

If you checked line 14b, fill out Form 22A-2 and file it with this form.

Official Form 22A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 2

Fill in this information to identify your case:					
Debtor 1 Clifford S. Smith					
Debtor 2 (Spouse, if filing	THEOLOTT. CHILLIT				
	United States Bankruptcy Court for the: Northern District of Ohio				
Case number					
(if known)					

Check one box only as directed in lines 40 or 42:

According to the calculations required by this Statement:

- 1. There is no presumption of abuse.
- $\square$  2. There is a presumption of abuse.
- ☐ Check if this is an amended filing

## Official Form 22A - 2

## **Chapter 7 Means Test Calculation**

12/14

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly income (Official Form 22A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	Calc	ulate Your Adjusted Income					
1.	Copy your	total current monthly income. Copy line 11	from Official Fo	rm 22A-1 here=	:>1.		7,337.00
2.	-	out Column B in Part 1 of Form 22A-1? in \$0 on line 3d.					
	■ Yes. Is y	our spouse Filing with you?					
	☐ No.	Go to line 3.					
	Yes.	Fill in \$0 on line 3d.					
3.	Adjust you household	r current monthly income by subtracting any part of your s expenses of you or your dependents. Follow these steps:	pouse's income	not used to pa	y for the		
	■ No. Fill	in \$0 on line 3d.					
	☐ Yes. Fill	in the information below:					
	For e	each purpose for which the income was used xample, the income is used to pay your spouse's tax debt or to ort other than you or your dependents.	are subtra	amount you acting from use's income			
	3a		\$				
	3b		\$				
	3c		\$				
	3d	Total. Add lines 3a, 3b, and 3c	\$	0.00			
				Copy tota	ıl here=>3d.	- \$ _	0.00
4.	Adjust you	r current monthly income. Subtract line 3d from line 1.				\$	7,337.00

Official Form 22A-2

**Chapter 7 Means Test Calculation** 

page 1

#### Part 2:

#### **Calculate Your Deductions from Your Income**

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 22A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 22A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

5

#### **National Standards**

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

1,780.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

#### People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$ 60
- 7b. Number of people who are under 65 X 5
- 7c. **Subtotal.** Multiply line 7a by line 7b. \$ 300.00 **Copy line 7c here=>** \$ 300.00

#### People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 144
- 7e. Number of people who are 65 or older X 0
- 7f. **Subtotal.** Multiply line 7d by line 7e. \$ \_\_\_\_\_\_ 0.00 Copy line 7f here=> \$ \_\_\_\_\_ 0.00
- 7g. Total. Add line 7c and line 7f \$ 300.00 Copy total here=> 7g. \$ 300.00

615.00

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

4.00

Explain why:

11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense.

☐ 0. Go to line 14.

☐ 1. Go to line 12.

2 or more. Go to line 12.

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

452.00

Official Form 22A-2

ebtor 2	Nicol	e Y. Smith		Cas	e number ( <i>if kno</i>	wn)		
13.		ownership or lease expense: Using the IRS Local not claim the expense if you do not make any loan			t ownership (	or lease e	expense for each	vehicle below.
Ve	hicle 1	Describe Vehicle 1:						
13a	. Ownersh	ip or leasing costs using IRS Local Standard		13a.	\$	0.00		
13b	-	monthly payment for all debts secured by Vehicle 1.						
	are cont	late the average monthly payment here and on line actually due to each secured creditor in the 60 montocy. Then dived by 60.						
	Na	ne of each creditor for Vehicle 1	Average mon payment	thly				
	-NO	DNE-	\$\$	Copy 13b				
				here =>	-\$	0.00	_	
13c.		cle 1 ownership or lease expense line 13b from line 13a. if this amount is less than \$0	, enter \$0.				Copy net Vehicle 1 expense	
				13c.	\$	0.00	here => \$	0.00
							_	
Ve	hicle 2	Describe Vehicle 2:						
13d	. Ownersh	ip or leasing costs using IRS Local Standard		13d.	\$	0.00		
13e	. Average leased v	monthly payment for all debts secured by Vehicle 2. ehicles.	. Do not include	costs for				
	Na	ne of each creditor for Vehicle 2	Average mon payment	thly				
	-NO	DNE-	\$	<u>Can</u> y 12a				
				Copy 13e here =>	-\$	0.00		
13f.		cle 2 ownership or lease expense line 13b from line 13a. if this amount is less than \$0	ontor CO				Copy net Vehicle 2	
	Subiraci	illie 130 Hom line 13a. II tills amount is less tilan \$0	, enter 50.	13f.	\$	0.00	expense here => \$	0.00
14.		ransportation expense: If you claimed 0 vehicles in rtation expense allowance regardless of whether you			I Standards,	fill in the	Public \$	0.00
15.	also ded	nal public transportation expense: If you claimed of uct a public transportation expense, you may fill in we more than the IRS Local Standard for Public Trans	hat you believe					0.00

Case number (if known)

Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	self-employment taxes, soo your pay for these taxes. H	mount that you will actually owe for federal, state and local taxes, such as income taxes, cial security taxes, and Medicare taxes. You may include the monthly amount withheld from lowever, if you expect to receive a tax refund, you must divide the expected refund by 12 from the total monthly amount that is withheld to pay for taxes.		4.500.00
	Do not include real estate,	sales, or use taxes.	\$ <u> </u>	1,530.00
17.	Involuntary deductions: Tootributions, union dues, a	The total monthly payroll deductions that your job requires, such as retirement and uniform costs.		
	Do not include amounts that	at are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	685.00
18.	filing together, include payr	monthly premiums that you pay for your own term life insurance. If two married people are ments that you make for your spouse's term life insurance. Do not include premiums for life ents, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	78.00
19.		The total monthly amount that you pay as required by the order of a court or has spousal or child support payments.		
	Do not include payments o	n past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	as a condition for your job,	hly amount that you pay for education that is either required: or ally challenged dependent child if no public education is available for similar services.	\$	0.00
21	Childcare: The total month	nly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
		or any elementary or secondary school education.	\$	0.00
22.	that is required for the heal	penses, excluding insurance costs: The monthly amount that you pay for health care th and welfare of you or your dependents and that is not reimbursed by insurance or paid at. Include only the amount that is more than the total entered in line 7.		_
	Payments for health insura	nce or health savings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependen	elephone services: The total monthly amount that you pay for telecommunication services its, such as pagers, call waiting, caller identification, special long distance, or business cell it necessary for your health and welfare or that of your dependents or for the production of ed by your employer.		
		or basic home telephone, internet and cell phone service. Do not include self-employment eported on line 5 of Official Form 22A-1, or any amount you previously deducted.	+\$_	220.00
24.	Add all of the expenses at Add lines 6 through 23.	allowed under the IRS expense allowances.	\$	5,664.00

Debtor 1 Clifford S. Smith Nicole Y. Smith

Case	number	(if known)

Add	ditional Expense De		ditional deduction	•	ne Means Test. s listed in lines 6-24.		
25.		disability insurance, and h	nealth savings a	ccount expen	ises. The monthly expenses for health ly necessary for yourself, your spouse,	or	
	Health insurance		\$	273.00			
	Disability insurance	Э	\$	0.00			
	Health savings acc	count	+ \$	0.00			
	Total		\$	273.00	Copy total here=>	\$	273.00
					]		
	Do you actually spo	end this total amount?					
	□ No. How m	uch do you actually spend?					
	Yes		\$				
26.	continue to pay for		ary care and supp	oort of an elder	e actual monthly expenses that you will ly, chronically ill, or disabled member o uch expenses.		0.00
27.					nses that you incur to maintain the es Act or other federal laws that apply.		
	By law, the court m	nust keep the nature of these	expenses confic	dential.		\$	0.00
28.	Additional home of allowance on line 8		nergy costs are ir	ncluded in your	non-mortgage housing and utilities		
		you have home energy costs sing and utilities allowance, t					
	• .	r case trustee documentatior reasonable and necessary.	n of your actual e	expenses, and y	you must show that the additional	\$	0.00
29.	\$156.25* per child)				e monthly expenses (not more than than 18 years old to attend a private or		
	0 ,	r case trustee documentatior ble and necessary and not a	•		you must explain why the amount 23.		
	* Subject to adjustr	ment on 4/01/16, and every 3	B years after that	for cases begu	in on or after the date of adjustment.	\$	0.00
30.	higher than the cor		wances in the IF	RS National Sta	ctual food and clothing expenses are indards. That amount cannot be more		
		wing the maximum additiona form. This chart may also be			e link specified in the separate erk's office.		
	You must show that	at the additional amount clain	ned is reasonable	e and necessar	ry.	\$	62.00
31.	Continuing charit instruments to a re	able contributions. The am ligious or charitable organiza	ount that you wil ition. 26 U.S.C. §	l continue to co 3 170(c)(1)-(2)	ontribute in the form of cash or financial	\$	0.00
32.	Add all of the add Add lines 25 through	litional expense deductions gh 31.	S			\$	335.00

Official Form 22A-2

Case number (if known)

33. For febts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 3 at through 33g.    1.500.00   Mortgages on your home:	Deduct	tions for Debt Payment					
Mortgages on your home:    Mortgages on your home:   Substitution	loa	ns, and other secured debt, fill in li	nes 33a through 33g.	_			
33a. Copy line 13b here	cred	ditor in the 60 months after you file for	bankruptcy. Then divide by 60.	due to e	acii secureu		
33b. Copy line 13b here		Mortgages on your home:					
Name of each creditor for other secured debt   Identify property that secures the debt   Does payment include taxes or insurance?   No   No   Yes   \$	33a.	Copy line 9b here			=	> \$	1,500.00
Name of each creditor for other secured debt    Identify property that secures the debt	33b.	Copy line 13b here			=	> \$	0.00
Include faxes or insurance?   33dNONE-   No   Yes   \$   No   Yes   Yes	33c.	Copy line 13e here			=	> \$	0.00
33e.   Yes   \$   33e.   No   Yes   \$   33f.   Yes   \$   33g. Total average monthly payment. Add lines 33a through 33f   \$   1,500.00   34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35.   Yes   S   1,500.00	Name of	f each creditor for other secured debt	Identify property that secures the debt		include taxes of		
33e.					□ No		
33e.   Yes \$    33g. Total average monthly payment. Add lines 33a through 33f   \$ 1,500.00    34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35.   Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor   Identify property that secures the debt   Total cure amount   Monthly cure amount    -NONE-   \$ ÷ 60 = \$    Total   \$ 0.00    Total   \$ 0.00    No. Go to line 36.   Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.	33d	NONE-			☐ Yes	\$	
33e.   Yes \$    33g. Total average monthly payment. Add lines 33a through 33f   \$ 1,500.00    34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35.   Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor   Identify property that secures the debt   Total cure amount   Monthly cure amount    -NONE-   \$ ÷ 60 = \$    Total   \$ 0.00    Total   \$ 0.00    No. Go to line 36.   Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.					□ No		
33f.   No   Yes   +\$    33g. Total average monthly payment. Add lines 33a through 33f   \$ 1,500.00    34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35.   Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor   Identify property that secures the debt   Total cure amount    -NONE-   \$ 0.00    Total   \$ 0.00    Copy total   here=> \$ 0.00    No. Go to line 36.   No. Go to li	33e.					\$	
33f. Total average monthly payment. Add lines 33a through 33f \$\ \$1,500.00\$ \$\ \$1,500.00\$ \$\ \$1,500.00\$ \$\ \$1,500.00\$ \$\ \$\ \$1,500.00\$ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\	_					•	
33g. Total average monthly payment. Add lines 33a through 33f \$\$\\$	22f				_	. Ժ	
33g. Total average monthly payment. Add lines 33a through 33f \$\\ \text{ 1,500.00} \\ \text{ 1,500.00} \\ \text{ heres>} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	331.					+⊅։ 1	
or other property necessary for your support or the support of your dependents?  No. Go to line 35.  Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor  Identify property that secures the debt  Total cure amount  -NONE-  Total  \$ 0.00  Copy total here=>  Total  Copy total here=> \$ 0.00  Total  Copy total here=> \$ 0.00  Total  Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.	33g. T	otal average monthly payment. Add li	nes 33a through 33f	\$	1,500.00	total	\$1,500.00
Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.    Name of the creditor   Identify property that secures the debt   Total cure amount   Monthly cure amount    -NONE-						_	
listed in line 33, to keep possession of your property (called the <i>cure amount</i> ).  Next, divide by 60 and fill in the information below.  Identify property that secures the debt  Total cure amount  *  Total cure amount  *  *  *  *  *  *  *  *  *  *  *  *  *		No. Go to line 35.					
-NONE-  Total  T		listed in line 33, to keep posses	ssion of your property (called the cure amount)				
Total \$ 0.00   Copy total here=> \$ 0.00    35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.	Name	of the creditor	Identify property that secures the debt				
Total \$ \$ 0.00    35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.	-NON	IE-		\$	÷	60 = \$	
Total \$ \$ 0.00    35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.						7	
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are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.  ■ No. Go to line 36.  □ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.			Tot	al \$	0.00		\$ 0.00
Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.				that		J	
ongoing priority claims, such as those you listed in line 19.		No. Go to line 36.					
		0 01 ,	•	\$	0.00 -	÷ 60 =	\$ 0.00

40. Find out whether there is a presumption of abuse. Check the box that applies:

- The line 39d is less than \$7,475\*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5.
- ☐ The line 39d is more than \$12,475\*. On the top of page 1 of this form, check box 2, *There is a presumption of abuse.* You may fill out Part 4 if you claim special circumstances. Go to Part 5.
- $\hfill\Box$  The line 39d is more than \$7,475\*, but not more than \$12,475\*. Go to line 41.

\*Subject to adjustment on 4/01/16, and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 2	Nico	ole Y. Smith	Case number (if known)
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If y A Summary of Your Assets and Liabilities and Certain Statistical In Schedules (Official form 6), you may refer to line 5 on that form.	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(	Copy
	110.	Multiply line 41a by 0.25.	)(2)(A)(I)(1)   \$   here=>   \$
25	% of y	ne whether the income you have left over after subtracting all al your unsecured, nonpriority debt. ne box that applies:	lowed deductions is enough to pay
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, check to Part 5.	pox 1, There is no presumption of abuse.
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this umption of abuse. You may fill out Part 4 if you claim special circums	
Part 4:	Giv	ve Details About Special Circumstances	
<b>■</b> N	Ves. Filite	e alternative? 11 U.S.C. § 707(b)(2)(B).  to to Part 5.  Il in the following information. All figures should reflect your average of the part of the special circumstances that excessary and reasonable. You must also give your case trustee docu dijustments.	make the expenses or income adjustments mentation of your actual expenses or income
		Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment
			\$
			<u> </u>
			<del></del>
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	_		\$
	_ _		\$ \$
Part 5:	_	gn Below	\$ \$
Part 5:	_	gn Below igning here, I declare under penalty of perjury that the information on	\$s this statement and in any attachments is true and correct.
	By si	igning here, I declare under penalty of perjury that the information on / Clifford S. Smith	/ Nicole Y. Smith
	By si	igning here, I declare under penalty of perjury that the information on / Clifford S. Smith  X /s	
	By si  X /s/ CI Signate De	igning here, I declare under penalty of perjury that the information on / Clifford S. Smith  Ilifford S. Smith  gnature of Debtor 1  eccember 5, 2014  Secember 5, 2014	/ Nicole Y. Smith icole Y. Smith

Official Form 22A-2

Clifford S. Smith

Debtor 1